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RCE
JW

**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000,
provides for continued examination of an utility or plant
application filed on or after June 8, 1995.
See The American Inventors Protection Act of 1999 (AIPA).

Application Number	09/987,707
Filing Date	November 15, 2001
Examiner Name	Vu Le
First Named Inventor	Alan J. Lipton
Group Art Unit	2621
Attorney Docket Number	37112-175340

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.
NOTE: 37 C.F.R. § 1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. § 1.53 (d) (PTO/SB/29) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA. See Changes to Application Examination and Provisional Application Practice, Interim Rule, 65 Fed. Reg. 14865 (Mar. 20, 2000), 1233 Off. Gaz. Pat. Office 47 (Apr. 11, 2000), which established RCE practice.

1. **Submission required under 37 C.F.R. § 1.114**
 - a. ☐ Previously submitted
 - i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on ____
(Any unentered amendment(s) referred to above will be entered).
 - ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on ____
 - iii. ☐ Other : ____
 - b. Enclosed
 - i. ☒ Amendment/Reply
 - ii. ☐ Affidavit(s)/Declaration(s)
 - iii. ☐ Information Disclosure Statement (IDS)
 - iv. ☐ Other ____
2. **Miscellaneous**
 - a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
 - b. ☐ Other ____
3. **Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.
 - a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 22-0261
 - i. ☒ RCE fee required under 37 C.F.R. § 1.17(e)
 - ii. ☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
 - iii. ☐ Other ____
 - b. ☐ Check in the amount of \$ ____ enclosed
 - c. ☐ Payment by credit card (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

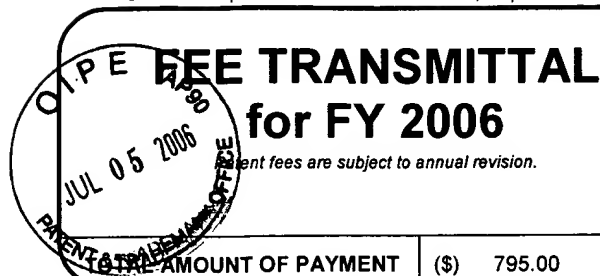
Name (Print /Type)	Michael A. Sartori, Ph.D.	Registration No. (Attorney/Agent)	41,289
Signature		Date	July 5, 2006

VENABLE
P.O. Box 34385
Washington, DC 20043-9998

SEND Fees and Completed Forms to the following address: Commissioner for Patents, Box RCE, P.O. Box 1450, Alexandria, VA 22313-1450.
PC Docs No. #765473

07/06/2006 SZEWDIE1 00000145 220261 09987707

01 FC:2001	395.00 DA
02 FC:2201	100.00 DA
03 FC:2202	100.00 DA



Complete if Known	
Application Number	09/987,707
Filing Date	November 15, 2001
First Named Inventor	Alan J. Lipton
Examiner Name	Vu Le
Group / Art Unit	2621
Attorney Docket No.	37112-175340

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEES	
Deposit Account Number: 22-0261		Fee Code	Lrg Ent Fee (\$)
Deposit Account Name: Venable LLP		Fee Code	Sm Ent Fee (\$)
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17			Fee Description
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			Fee Paid
2. <input type="checkbox"/> Payment Enclosed:		1111	500
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other Deposit Account		1112	100
		1113	300
		1114	500
		1311	200
		1312	130
		1313	160
		1314	600
		1051	130
		1052	50
		1053	130
		1812	2,520
		1804	920*
		1805	1,840*
		1251	120
		1252	450
		1253	1,020
		1254	1,590
		1255	2,160
		1401	500
		1402	500
		1403	1,000
		1451	1,510
		1452	500
		1453	1,500
		1501	1,400
		1502	800
		1503	1,100
		1807	50
		1806	180
		8021	40
		1809	790
		1810	790
		1801	790
		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\$395)	

FEE CALCULATION	
1. BASIC FILING FEE	
Large Fee Code	Entity Small Fee Code
Fee (\$)	Fee (\$)
Fee Description	Fee Paid
1011	300
1012	200
1013	200
1014	300
1005	200
1081	250
1082	250
1083	250
1084	250
1085	250
SUBTOTAL (1) (\$0)	
2. EXTRA CLAIM FEES	
Total Claims	32
Independent Claims	6
Multiple Dependent	
Extra Claims	4
Fee from below	50
Fee Paid	200
Extra Claims	1
Fee from below	200
Fee Paid	200
Multiple Dependent	
Fee from below	
Fee Paid	
SUBTOTAL (2) (\$400)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Michael A. Sartori, Ph.D.	Reg No. Attorney/Agent	41,289
Signature		Telephone	202-344-4000
		Date	July 5, 2006